



SOUTH CAROLINA DEPARTMENT OF MENTAL HEALTH

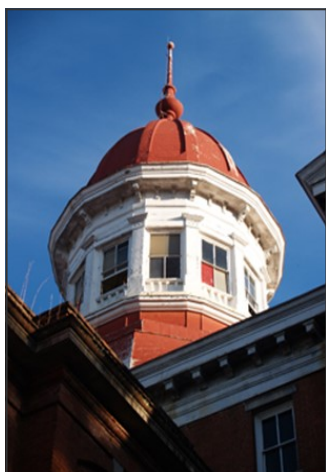
Mark W. Binkley, JD, Interim State Director

TRI-COUNTY COMMUNITY MENTAL HEALTH CENTER

Teresa Curry, Executive Director

December 2019

**DMH
MISSION:
TO SUPPORT THE
RECOVERY
OF PEOPLE WITH
MENTAL
ILLNESSES.**



Babcock Building Cupola

DMH HOSPITALS AND NURSING HOMES

Columbia, SC

G. Werber Bryan Hospital

Morris Village Alcohol & Drug
Addiction Treatment Center

C.M. Tucker, Jr. Nursing Care
Center - Stone Pavilion
(Veterans Nursing Home)

C.M. Tucker, Jr., Nursing Care
Center - Roddey Pavilion

Anderson, SC

Patrick B. Harris Hospital

Richard M. Campbell
Veterans Nursing Home

Walterboro, SC

Veterans Victory House
(Veterans Nursing Home)

DMH HISTORY AND DEMOGRAPHICS

South Carolina has a long history of caring for those suffering from mental illness. In 1694, the Lords Proprietors of South Carolina established that the destitute mentally ill should be cared for by local governments. The concept of "Outdoor Relief," based upon Elizabethan Poor Laws, affirmed that the poor, sick and/or disabled should be taken in or boarded at public expense. In 1762, the Fellowship Society of Charleston established an infirmary for the mentally ill. It was not until the 1800's that the mental health movement received legislative attention at the state level.

Championing the mentally ill, South Carolina Legislators Colonel Samuel Farrow and Major William Crafts worked zealously to sensitize their fellow lawmakers to the needs of the mentally ill, and on December 20, 1821, the South Carolina State Legislature passed a statute-at-large approving \$30,000 to build the South Carolina Lunatic Asylum and a school for the 'deaf and dumb'.

The Mills Building, designed by renowned architect Robert Mills, was completed and operational in 1828 as the South Carolina Lunatic Asylum. The facilities grew through the decades to meet demand, until inpatient occupancy peaked in the 1960's at well

over 6,000 patients on any given day. Since the 1820's, South Carolina state-run hospitals and nursing homes have treated approximately one million patients and provided over 150 million bed days.

In the 1920's, treatment of the mentally ill began to include outpatient care as well as institutional care. The first outpatient center in South Carolina was established in Columbia in 1923.

The 1950's saw the use of phenothiazines, "miracle drugs" that controlled many severe symptoms of mental illness, making it possible to "unlock" wards. These drugs enabled many patients to function in society and work towards recovery, reducing the need for prolonged hospitalization. Government support and spending increased in the 1960's. The South Carolina Community Mental Health Services Act (1961) and the Federal Community Health Centers Act (1963) provided more funds for local mental health care.

The South Carolina Department of Mental Health (DMH) was founded in 1964. In 1967, the first mental healthcare complex in the South, the Columbia Area Mental Health Center, was built. Since then, the Centers and clinics have served more than three million patients, and provided more than 42 million clinical contacts.

Today, DMH serves approximately 100,000 people each year, approximately 30,000 of whom are children and adolescents. As South Carolina's public mental health system, it provides outpatient mental health services through a network of 16 community mental health centers and associated clinics, serving all 46 counties, and psychiatric hospital services via three State hospitals, including one for substance use treatment. In addition to mental health services, the Agency provides long-term care services in one community nursing care center and three State veterans' nursing homes.

In response to community needs, DMH has developed multiple innovative programs, two of which are its School Mental Health Services (SMHS) and Telepsychiatry.

**DMH
OPERATES A
NETWORK OF
SIXTEEN
COMMUNITY
MENTAL HEALTH
CENTERS,
MULTIPLE CLINICS,
THREE HOSPITALS,
THREE VETERANS'
NURSING HOMES,
AND ONE
COMMUNITY
NURSING HOME.**



Tri-County Community Mental Health Center

1035 Cheraw Street

Bennettsville, SC 29512

843-454-0841—Administration

Counties Served: Chesterfield, Marlboro, Dillon

TRI-COUNTY COMMUNITY MENTAL HEALTH CENTER

In 1960, Louise Lee and a small group of Marlboro County ladies began advocating for community care for those experiencing mental illness. Five years later, Tri-County Mental Health Clinic began operations in Bennettsville. With a staff of four, under the direction of Dr. Al B. Harley, Jr., mental health care was made available locally to the citizens of Marlboro, Chesterfield, and Dillon counties. It was not until 1970 that services were actually provided on a part-time basis in Chesterfield and Dillon counties.

Over the years, Tri-County Community Mental Health Center (TCCMHC) has been in many locations, typically sharing space with

other agencies or using available buildings, such as a courthouse basement, an old pharmacy, the Coachman 4 Club, a former carpet store, and an old, vacant mortuary.

Today, TCCMHC operates out of buildings that staff and patients helped design. Built specifically for mental health services, TCCMHC opened its Marlboro office in 1993, its Dillon Office in 1997, and its Chesterfield office in 2000.

TCCMHC provides mental health services to people of all ages. A staff of approximately 50 offers counseling, psychiatric assessment, medication management, crisis intervention, and other services to people

experiencing serious mental illness and significant emotional disorders.

During fiscal year 2019, TCCMHC served 2,179 citizens in its three-county catchment area. These individuals received 27,312 outpatient contacts/services.

All DMH facilities are licensed or accredited; TCCMHC has been accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) since 1997.

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Lake Paul Wallace, Bennettsville, SC



Teresa Curry,
Executive Director

“TCCMHC STAFF
ARE DEDICATED TO
HELPING PATIENTS’
RECOVER AND MEET
THEIR OWN
INDIVIDUAL GOALS
AND
EXPECTATIONS.”

...CURRY

TERESA CURRY, EXECUTIVE DIRECTOR

Executive Director Teresa Curry earned a bachelor’s degree in business administration from Francis Marion University and a master’s degree in counseling from Webster University. She began her career at TCCMHC in 2004 when she was hired as a children’s counselor in the Dillon County Clinic. Since then, she has held several different roles within the Center, including Children, Adolescents and Family (CAF) Services coordinator and Quality Assurance coordinator. She became the executive director in June 2018.

Prior to her adventures at TCCMHC, Curry worked at Francis Marion University and the Medical University of South Carolina. Helping others reach their goals has always been her passion.

There have been many changes during the past 15 years of Curry’s tenure with TCCMHC. The Center has

adapted to the varying needs of the communities that it serves. Center staff are enmeshed in the communities of the Tri-County catchment area—Chesterfield, Dillon, and Marlboro counties. By participating in community events, the Center works to reduce the stigma around mental health treatment and to provide educational opportunities aimed at enhancing the community’s overall knowledge about mental health and available resources. TCCMHC is dedicated to helping patients and their families become more comfortable with caring for their mental health. The Center staff strives to increase the awareness of the equal importance of treating both physical and mental health needs. Center staff’s goal is for all patients who need help to feel comfortable enough to walk through the door and ask for it.

Being one of the smallest

mental health centers in the DMH system does not come without challenges, but TCCMHC has strong leadership and managers that are problem solvers. The caring and qualified staff makes taking care of patients their top priority. The Center rolled out several key initiatives over the past year and has made great strides in its capacity to provide a wider array of services. The Center enlists assistance from some of its retired clinicians to work part-time to help fill staffing gaps. The goal is to fill positions as quickly as possible so as not to disrupt patient care. “It is important that the staff feel valued and part of the TCCMHC team. The work that we do is not easy, but it makes a difference in our patients’ lives. TCCMHC staff are committed to helping patients’ recover and meet their own individual goals and expectations,” said Curry.

SIMI SACHDEV, M.D., MEDICAL DIRECTOR



Simi Sachdev, M.D.,
Medical Director

Simi Sachdev, MD, received her medical degree in 1995 from Lady Hardinge Medical School in New Delhi, India. She completed her residency at Henry Ford Hospital in Detroit, MI, and completed a child psychiatry fellowship at The State University of

New York Health Science Center at Syracuse in 2002.

Dr. Sachdev joined the Center in 2004, but worked with Marlboro Park Hospital prior and Aurora Pavilion during a short break from the Center in 2009. She returned to TCCMH in 2011 as medical director. She primarily sees

patients in the Dillon clinic, but also provides telepsychiatry to patients in the Bennettsville and Chesterfield clinics. She shows great dedication and commitment to compassionate care of the Center’s patients.

Dr. Sachdev is married and has two sons.

THE TCCMHC BOARD

The Tri-County Community Mental Health Center Board is a dedicated group of members representative of the populations of the counties served by the Center. The Board is very supportive of TCCMHC and its efforts to care for the mental health of the citizens it serves. Board meetings are held on a monthly basis, which allows the Board to stay updated on all of the important things going on at the Center.

Many of those on the Board have served multiple terms and continue to provide valuable advice and support to the Center. Board members have varying backgrounds and expertise that they contribute to the Cen-

ter. Board Chair Clifford C. “Cliff” McBride, Esq., is a senior staff attorney for South Carolina Legal Services, providing legal aid to low income individuals in need of legal services in six counties of the Pee Dee district. “I’m just a country lawyer,” said McBride. He has served on the TCCMHC board for more than 14 years.

William Stubbs currently serves as vice-chair and has served on the Board since 2002. He is a retired Chesterfield County School District educator. The secretary/treasurer is Angela Johnson, a cosmetologist at The Regal Touch in Bennettsville. She has served on the Board for the last three years. Other mem-

bers include James Aldridge (since 2014), who retired from the hardware industry after 47 years, then worked as a salesman for Carolina Landscape Supply; John Hepburn (since 2002), a retired sergeant investigator with the Bennettsville Police De-

partment; Sue Mangum (since 2008), a retired school administrator with Chesterfield County School District; and Harvell Parnell (since 1994), the pharmacist in charge at Marlboro Drug Company.



Seated L to R: William Stubbs, Sue Mangum, Harvell Parnell, and Angela Johnson

Standing L to R: James Aldridge, Clifford McBride, and John Hepburn

SCHOOL MENTAL HEALTH SERVICES

TCCMHC offers School Mental Health Services (SMHS) in 13 schools throughout its catchment area. These services involve partnerships between schools and TCCMHC to help with prevention, early intervention, and intervention specifically to improve student mental health and wellness. SMHS reduce barriers to students’ learning and help students achieve success at school.

SMHS aim to prevent or assist students with social, emotional, and/or behav-

ioral problems. This is accomplished by meeting directly with students at the school and providing an array of mental health services—crisis intervention, assessment, individual, family and group therapy—based on the individual needs of the student.

SMHS allow mental health counselors to work directly with school personnel, benefitting both staff and students. The connections with school personnel are one of the biggest strengths of SMHS.

Benefits of SMHS:

SMHS counselors are a part of the school and its culture - which is awesome.

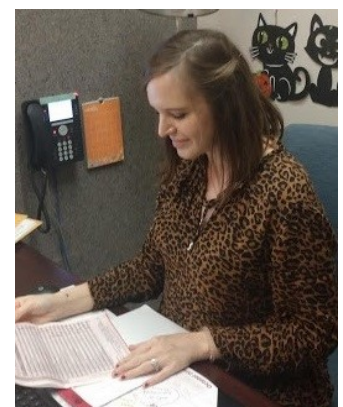
Providing services in school allows counselors to work on skills and role-play situations in real-time.

Counselors in close proximity are able to lead students through stressful situations, such as panic attacks.

Parents don’t mind meeting at the school. In rural areas, many parents walk

to the school for appointments.

Seeing students in their natural environment is less stigmatizing.



Anna Paul, School Mental Health Services



L to R: Shanika Brown, Marlboro County ICT and Aimee Seals, ICT Supervisor

INTENSIVE COMMUNITY TREATMENT

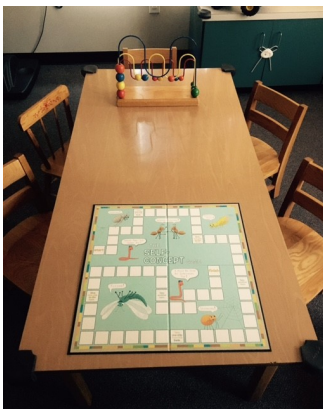
Beginning in the summer of 2019, the Center began providing Intensive Community Treatment (ICT) services to adult patients. ICT is a multi-disciplinary team approach to provide intensive levels of individualized support and service in natural environments. The team's focus is to enhance function for

patients in the community when goals cannot be reached through traditional office-based treatment.

The ICT team at TCCMHC is made up of a master's level clinician, bachelor's level clinicians, and a nurse practitioner. These individuals go into homes and provide mental

health counseling, skill building, and medication management services to patients.

ICT is utilized to promote positive change in multiple areas and facilitate access to resources that will boost recovery and promote psychiatric stability.



INTENSIVE FAMILY SERVICES AND MULTI-DIMENSIONAL FAMILY TREATMENT

Intensive Family Services are family services provided primarily in the home using evidence-based practices.

Multi-Dimensional Family Treatment is utilized to assist children and adoles-

cents who demonstrate a need for more intensive services than are available through traditional outpatient treatment. Patients who need this service are those in danger of being removed from the home due to mental health is-

suess. Services are provided intensively in the home with the goal of helping patients remain in their homes with their families. Treatment focuses on both the patient and their family.

COMMUNITY CRISIS RESPONSE AND INTERVENTION

Community Crisis Response and Intervention (CCRI) is an important resource to help manage mental health crises across the state. Each Center has a team of providers ready to respond, with law enforcement, to mental health emergencies 24 hours a day, seven days a week. The goal of CCRI is to reduce unnecessary

emergency room visits and incarcerations when an individual is acting out due to a mental health emergency. The team comprises master's level clinicians with training in crisis intervention.

The team will go wherever the patient is located, e.g. a home, parking lot, etc. along with law enforcement and assess the

patient's immediate mental health needs. Depending on the presentation of the patient, the team will either have the patient follow up the next day at the Center, go directly to a psychiatric hospital, or go to the emergency room if there are no other options.



INDIVIDUAL PLACEMENT AND SUPPORT

Individual Placement and Support (IPS) is a new program at TCCMHC that began in the summer of 2019. IPS is an evidence-based program to help patients become employed. The IPS team assists with all aspects of the job process: they go into the community and work with employers in order to develop job opportunities for patients; they provide necessary support throughout the job search, interviews, and even on-

the-job support for patients. This program has been tested nationwide and has proven to be beneficial to individuals' recovery.

The only requirement for a patient to participate is that they "want to work". There are no other requirements. The IPS team works in coordination with the Department of Vocational Rehabilitation and the patient's treatment team to remove any

barriers to the patient finding a job that fits their skills and abilities. Treatment services continue while the IPS team works with the patient on employment. The goal is to help the patient find competitive employment. A Benefits Specialist from Vocational Rehabilitation works with all patients in IPS to help them determine how becoming employed will impact their benefits.



L to R: Lonnie Wade, IPS Supervisor, Rantaisha Robinson, Employment Specialist, and Alton Davis, Employment Specialist

EFFECTIVE PARTNERSHIPS

Improving the health and wellbeing of citizens of Chesterfield, Dillon, and Marlboro counties could not be done without strong partnerships. TCCMHC works closely with a variety of organizations, educational systems, other state agencies, county collaborative councils, and other healthcare providers.

Key members of TCCMHC's staff actively participate in the county collaborative councils that regularly meet in each of the counties served by the Center. The councils are made up of many county and community agencies, as well as representatives from the faith-based and other

volunteer organizations. An effective working relationship with the school districts makes the School Mental Health program a continued success. The Center also works closely with county Department of Social Services and Department of Juvenile Justice offices to meet needs of shared patients.

The executive director of TCCMHC is a member of the Northeastern Rural Health Network (NRHN), which has a goal of "improving access to quality healthcare in rural communities through increased collaboration and communication among providers." The NRHN is made up of

key stakeholders in the healthcare of residents of TCCMHC's communities.

Effective working relationships with McLeod Dillon and McLeod Cheraw hospitals have resulted in decreases in emergency department utilization by TCCMHC patients.

Partnerships with Vocational Rehabilitation, local law enforcement, institutions of higher learning, Disabilities and Special Needs, healthcare providers, and substance abuse treatment providers have all contributed to TCCMHC being able to meet the specific needs of its patients.



TO SUPPORT THE RECOVERY OF
PEOPLE WITH MENTAL ILLNESSES.

**SC DEPARTMENT OF
MENTAL HEALTH**

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Columbia, South Carolina 29201

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WWW.SCDMH.NET

WWW.TRICOUNTYCMHC.ORG

Bennettsville Clinic

1035 Cheraw Street
Bennettsville, SC 29512
(843) 454-0442

Chesterfield Clinic

207 Commerce Avenue
Chesterfield, SC 29709
(843) 623-2229

Dillon Clinic

1324 Commerce Drive
Dillon, SC 29536
(843) 774-3351

“A GROWING TREASURE”, BY DEBBIE S.

When my son, J., first began receiving mental health services at age five, I knew something was wrong. He was very defiant and sometimes aggressive. He did not know how to interact with others. I remember sitting with him and having to hold him tightly to keep him from falling apart. He would hide under tables when first coming to appointments at Tri-County Community Mental Health Center (TCCMHC) and didn't like people to make eye contact with him. His mind was all over the place and he couldn't concentrate on anything. He used to scare me so much,

but has blossomed tremendously.

Things progressed slowly at first, he formed lasting bonds with each of his previous counselors, but he loves his current counselor, Tabitha. The progress he has made brings tears of joy to my eyes.

He has such a caring spirit and has been making so many good choices and changes since coming to TCCMHC. He has been making straight A's since getting on track. His medicine and therapy has helped to level him out. J. has more confidence and his progress thrills me. I wouldn't choose any other

provider over TCCMHC. I would tell anyone about the hard work staff has done to help him make progress.

I would like to highlight some of his accomplishments. He achieved a yellow belt in Taekwondo, he weightlifts after school, and loves doing yard work. He loves to do chores and enjoys learning new things.

Other kids have been inspired by J. He sometimes tells his friends how he copes with stress. He shared his relaxation skills with a friend who wrote a paper thanking him as her superhero.

J. has a love for animals and the outdoors. His teachers have noticed major changes and describe him as extraordinary. His facial expressions, ability to engage, and confidence have changed for the positive. He is now outgoing and has grown to become a people person.

Throughout treatment, we never allowed anxiety or autism to limit his goals. I am thankful for all the progress J. has made throughout the years, growing up with TCCMHC. He's a 15 year old growing treasure.